

INFORMATION PAPER

SUBJECT: Process for Combat Support Equipment Assessment (CSEA)

1. PURPOSE: The CSEA is designed to ensure that deployable Medical Treatment Facilities (MTFs) have appropriate clinical equipment. To accomplish this mission, the CSEA reviews and recommends technology for medical and support equipment.

2. BACKGROUND: Staff from the Technology Support Division, Materiel Acquisition Directorate, U.S. Army Medical Materiel Agency (USAMMA) is expected to act as the lead in conducting the CSEA with assistance from other directorates or organizations.

3. FACTS: The process for the CSEA is as follows:

a. A request is made by a unit or local Commander to have a CSEA conducted. The CSEA also may be performed at the direction of the Office of the Surgeon General (OTSG), U.S. Army Medical Command (USAMEDCOM), or other appropriate command unit. Examples of units that may require an assessment include the Combat Support Hospital (CSH), Forward Surgical Team (FST), Division level units, or battalion aid station. The CSEA may require a site visit to the unit in the field. In some cases, a CSEA may be a paper evaluation conducted at USAMMA.

b. A copy of the Standard Operating Procedure (SOP) for the CSEA will be sent to the unit. The SOP will provide instructions and discuss how evaluations will be conducted during the CSEA process. A checklist that will define what areas of technology the CSEA will assess will also be sent to the unit.

c. Information will be requested from the unit at which the CSEA is to be performed. The information requested will include the following:

(1) Equipment density by manufacturer and model.

(2) A self-assessment of the unit or information from a previous evaluation.

(3) An analysis of what the unit believes the current status of their unit to be.

(4) Unit level equipment issues.

d. An off-site preliminary technical evaluation is conducted at USAMMA. USAMMA's clinical engineers and technicians will identify what equipment is current and what may be potentially ready for replacement. The information will be entered into an equipment database. The database allows easier management of data and reports, and queries can be run to

identify or group equipment by manufacturer or type of equipment, date equipment went into service, or any other equipment factor.

e. An on-site evaluation can be conducted. The on-site evaluation should be conducted in the deployed environment to take advantage of and to see equipment as it is set up to function. The recommended team, which would be six to eight individuals, to conduct the on-site evaluation consists of the following:

(1) Staff from the Technology Support Division, Materiel Acquisition Directorate, USAMMA (up to three individuals).

(2) One representative from the Directorate of Combat and Doctrine Development (DCDD), USAMEDCOM.

(3) Two subject matter experts (SMEs), who could be representatives from the Office of The Surgeon General (OTSG), DCDD, or Joint Readiness Clinical Advisory Board (JRCAB).

(4) One representative from the National Maintenance Point, USAMMA.

(5) One representative from the Force Sustainment and Modernization Directorate, USAMMA (optional).

f. The on-site evaluation will include assessments of the following:

(1) Level of technology.

(2) Current condition of the equipment assessed.

(3) Equipment compatibility, which includes compatibility with the power source and the current power grid.

(4) Environmental factors that may affect the equipment.

(5) Emerging initiatives, such as patient movement items (PMI), the Medical Reengineering Initiative (MRI), Medical Communications for Combat Casualty Care (MC4), and digital technology, and how they may affect the equipment.

(6) Levels of equipment usage to determine which items of equipment are candidates for virtual unit assemblages.

(7) Probable patient flow and patient mix and how they may affect equipment requirements.

(8) Skill levels of personnel and personnel proficiency.

(9) Clinical operations.

f. At the end of the on-site assessment, a draft initial report and outbrief of findings and recommendations will be presented to the Commander or his or her representative.

g. A final report and after-action review will follow in 6 to 8 weeks.

4. Some variation in equipment exists between units with the same theoretical complement of equipment. However, just because all units are not standardized does not mean the unit cannot perform its mission, and the CSEA assessment will take this into account.

5. The CSEA will provide the opportunity to program windows in equipment replacement via the Program Objective Memorandum (POM) for transition to new equipment or upgrades of existing equipment.